

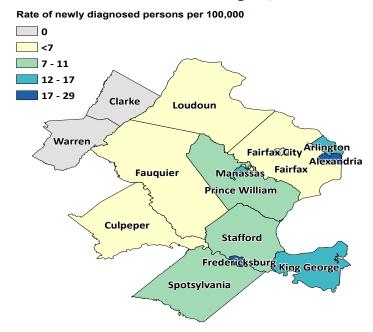
DC Eligible Metropolitan Area (EMA)

Part A of the Ryan White (RW) HIV/AIDS Treatment Extension Act of 2009 provides funding assistance to Eligible Metropolitan Areas (EMAs). For a geographical area to qualify for EMA status, an area must have reported at least 2,000 AIDS cases in the previous five years and have a population of at least 50,000. The District of Columbia (DC) EMA consists of localities from four jurisdictions: DC, Virginia, Maryland, and West Virginia. All data on the DC EMA will be focused on the Virginia portion of the DC EMA, which consists of 17 localities in Northern Virginia.

HIV DISEASE DIAGNOSES

In 2015, there were 262 persons newly diagnosed with HIV disease in the Virginia portion of the DC EMA, which represents 28% of all newly diagnosed cases in Virginia in 2015. Figure 1 shows the distribution of newly diagnosed cases across cities/counties in the DC EMA. The cities of Fredericksburg and Alexandria had the highest rates of newly diagnosed HIV cases in 2015, at 28 and 25 cases per 100,000 population, respectively. The locality with the lowest HIV diagnosis rate in 2015 was Culpeper County, at 4 cases per 100,000 population.

Figure 1: Rate of HIV Disease Diagnosis Rates among DC EMA Localities in Virginia, 2015

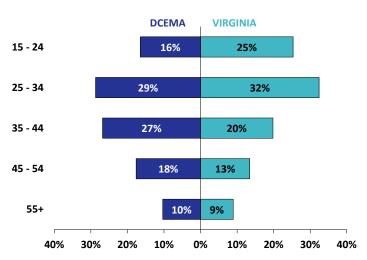


By Gender

Seventy-eight percent of the new HIV diagnoses in 2015 in the DC EMA were male, which is also comparable to the state's gender distribution of new HIV diagnoses in 2015.

By Age at Diagnosis

Figure 2: HIV Disease Diagnoses in the DC EMA and Virginia by Age at Diagnosis, 2015



According to Figure 2, the average age at diagnosis among new HIV diagnoses in 2015 in the DC EMA mirrors that of Virginia (35.8 versus 34.7 years). The highest percentage of new diagnoses occurred among the 25-34 age group in the DC EMA and in Virginia in 2015. Figure 2 shows a higher proportion of HIV-positive persons in the DC EMA being diagnosed at ages 35 to 44. Overall, the distribution in the DC EMA shows age at diagnosis of persons newly diagnosed with HIV is slightly more concentrated among persons ages 35 and older than in Virginia as a whole.

By Race/Ethnicity

In 2015, the highest percentage of new HIV disease diagnoses was among Black, non-Hispanics in the DC EMA (47%). In the DC EMA, the ratio of Whites to Hispanics/Latinos diagnosed with HIV in 2015 was roughly equal, whereas in Virginia overall, there were about two White persons for every one Hispanic/Latino person diagnosed with HIV in 2015.

Table 1: HIV Disease Diagnoses in the DC EMA and Virginia by Race/Ethnicity, 2015

Lower % Higher %

| Race/Ethnicity | D.C. EMA | VIRGINIA |
|---------------------------------|----------|----------|
| Black, non-Hispanic | 47% | 63% |
| White, non-Hispanic | 23% | 24% |
| Hispanic (all races) | 23% | 10% |
| Asian/Hawaiian/Pacific Islander | 6% | 3% |
| Multi-race/Unknown | 1% | 1% |

By Transmission Category

Male-to-male sexual contact (MSM) accounted for most new HIV diagnoses among DC EMA residents in 2015 (44%), followed by heterosexual contact (13%), injection drug use (IDU) and MSM with a history of IDU (both <2%), and mother-to-child transmission (<1%).

LATE DIAGNOSIS

Early knowledge of HIV infection can improve an individual's health outcome and help prevent further HIV transmission. Late diagnosis refers to cases that have an initial AIDS diagnosis or receive an AIDS diagnosis within 12 months of their HIV diagnosis. To determine late diagnosis, one year of follow-up from the first HIV diagnosis is needed to determine if a person is also diagnosed with AIDS in that year. Because of this reason, the most recent year of data available in Virginia is 2014. In 2014, 31% of new diagnoses in the DC EMA were diagnosed late.

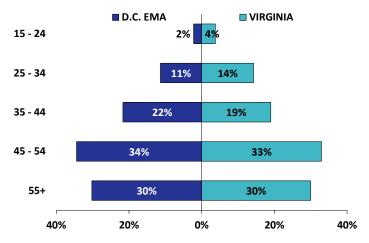
HIV/AIDS PREVALENCE

As of 2015, there were 7,555 persons living with HIV (PLWH) in the DC EMA, which represented 30% of all PLWH in Virginia (24,853). Fifty-one percent of PLWH in the DC EMA had an AIDS—defining condition as of December 31, 2015, versus 47% of PLWH in the state. Seventy-eight percent of PLWH in the DC EMA as of the end of 2015 were male.

By Current Age

The majority of PLWH in Virginia are 35 or older, comparable to the age distribution of PLWH in Virginia. In the DC EMA, the percentage of young adults aged 25 to 34 living with HIV is slightly lower than that in Virginia (11% versus 14%).

Figure 3: HIV Disease Diagnoses in the DC EMA and Virginia by Current Age as of December 31, 2015



By Race/Ethnicity

Table 2 shows a more even racial/ethnic distribution of PLWH in the DC EMA compared to the state, with the percentage of Black, non-Hispanics living with HIV in Virginia being 13% higher than that in the DC EMA. Approximately 15% of PLWH in the DC EMA are Hispanic/Latino, as compared to 8% in Virginia.

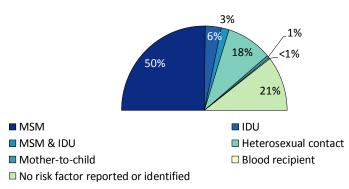
Table 2: Percentage of PLWH in the DC EMA and Virginia by Race/Ethnicity, 2015

| Lower % | Higher % | |
|---------------------------------|----------|----------|
| Race | DCEMA | VIRGINIA |
| Black, non-Hispanic | 46% | 59% |
| White, non-Hispanic | 34% | 30% |
| Hispanic (all races) | 15% | 8% |
| Asian/Hawaiian/Pacific Islander | 3% | 1% |
| Multi-race/Unknown | 2% | 2% |

By Transmission Category

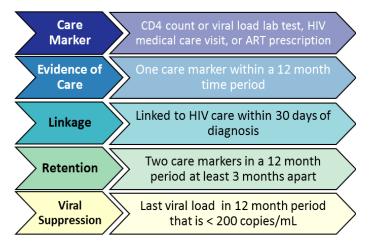
MSM accounted for most HIV infections among PLWH in the DC EMA (50%), followed by those with no risk reported or identified (21%), heterosexual contact (18%), IDU (6%), MSM & IDU (3%), mother-to-child transmission (1%) and receipt of blood products (<1%) (Figure 3).

Figure 4: HIV Disease by Transmission Category in the DC EMA, 2015



HIV CARE CONTINUUM

Figure 5: HIV Care Continuum Definitions



The HIV Care Continuum (HCC) is a framework for assessing health outcomes among persons living in the DC EMA with diagnosed HIV infection. Figure 5 shows definitions for the HCC health outcomes of linkage, retention, and viral suppression. As of 2015, 47% of the 7,555 PLWH in the DC EMA had evidence of HIV care in 2015. Only 34% of PLWH in the DC EMA were retained in care and 37% of them were virally suppressed, compared to 43% and 42% of Virginians living with HIV in 2015.

In 2015, 68% of newly diagnosed patients were linked to care within 30 days, compared to 70% of Virginians living with HIV in 2015 (Figure 6).

Figure 6: HIV Care Continuum among PLWH in the DC EMA and PLWH in Virginia, 2015

